Serial

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SEC USE ONLY

**UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

080421

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

Filing Under (Check box(es) that a	apply):	
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[] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE

Type of Filing: [X] New Filing [] Amendment

#### A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.)

First American Bancorp

Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (303) 694-6464

8390 E. Crescent Parkway, Suite 100 Greenwood Village, CO 80111

Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)

(if different from Executive Offices)

Same as above.

Brief Description of Business: Bank holding company.

Type of Business Organization

[X] corporation [] limited partnership, already formed [] other (please specify); limited liability company

[] business trust [] limited partnership, to be formed

> Month Year

Actual or Estimated Date of Incorporation or Organization: [ 98 ] [X] Actual [] Estimated [11]

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

CN for Canada; FN for other foreign jurisdiction)

[0][0]

#### **GENERAL INSTRUCTIONS**

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION: Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the

filing of a federal notice.

# A. BASIC IDENTIFICATION DATA

<ul> <li>Enter the information requested for the</li> <li>Each promoter of the issuer, if th</li> <li>Each beneficial owner having the equity securities of the issuer;</li> <li>Each executive officer and direct issuers; and</li> <li>Each general and managing part</li> </ul>	e issuer has been orgar power to vote or dispos or of corporate issuers a	se, or direct the vote or d and of corporate genera	isposition of,	
Check Box(es) that Apply: [] Promoter	[X] Beneficial Owner	[X] Executive Officer	[X ]Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)				Managing Farmer
Davidson, John R.				
Business or Residence Address (Numbe	r and Street, City, State	, Zip Code)		
8390 E. Crescent Parkway, Suite	e 100, Greenwood Villag	je, CO 80111		
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)				Managing Farmer
Aronowitz, Robert				
Business or Residence Address (Numbe	r and Street, City, State	, Zip Code)		
1615 Downing Street, Denver, C	O 80218			
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)				
Franzgrote, Joseph	•			
Business or Residence Address (Numbe	r and Street, City, State	, Zip Code)		
#1 Glenmoor Cr., Cherry Hills Vil	llage, CO 80110			
Check Box(es) that Apply: [ ] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)				managing rainer
Leonard, Stephen				
Business or Residence Address (Numbe	r and Street, City, State	, Zip Code)		
P.O. Box 710, Rancho Sante Fe	, CA 92067			
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)				
Shwayder, Scott				
Business or Residence Address (Numbe	r and Street, City, State	, Zip Code)		

1873 S. Bellaire St., Suite 790, Denver, CO 80222

**						
Check Box(es) that Apply: [ ] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	• •		
Full Name (Last name first, if individual)				Managing Partner		
Carol M. Wiederanders Trust						
Business or Residence Address (Number	and Street, City, State,	<u>Zip Code)</u>				
American State Bank, Trustee Attn: Noel Hansen, Trust Officer 223 Main Street Williston, ND 58801						
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director			
Full Name (Last name first, if individual)			,	Managing Partner		
McGilvery, Richard						
Business or Residence Address (Number and Street, City, State, Zip Code)						
8390 E. Crescent Parkway, Suite 100, Greenwood Village, CO 80111						
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director	[] General and/or Managing Partner		
Full Name (Last name first, if individual)						
Streno, Carol						
Business or Residence Address (Number	and Street, City, State,	Zip Code)				

8390 E. Crescent Parkway, Suite 100, Greenwood Village, CO 80111

### **B. INFORMATION ABOUT OFFERING**

1. Has	the issu	er sold, d	or does t	he issue	r intend	to sell, to	non-ac	credited	investors	in this o	offering?		Yes []	No [X]
Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?							\$ <u>25,0</u>							
3. Does	s the offe	ering per	rmit joint	ownersh	nip of a s	ingle uni	t?	,	. ,				Yes [X]	No []
any coi offering and/or	mmissio j. If a pe with a st	n or simi rson to b ate or st	ilar remu se listed ates, list	neration is an ass the nam	for solic sociated ne of the	itation of person o broker o	purchas or agent or or dealer.	sers in co of a brok If more	onnection er or dea than five	with sa aler regis (5) pers	les of se stered wi sons to b	r indirectly, curities in th th the SEC e listed are dealer only.	е	
Full Na	me (Las	t name f	irst, if inc	dividual)	ı	Not Ap	plicab	le						
Busine	ss or Re	sidence	Address	(Numbe	er and St	reet, Cit	y, State,	Zip Cod	e)					
Name (	of Assoc	iated Br	oker or [	Dealer										
(Check	: "All Sta	tes" or c	Listed F	ividual S	itates) .						, , , , , , , , , , , , , , , , , , ,		[] All	States
(AL) [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Na	me (Las	t name t	first, if inc	dividual)										
Busine	ss or Re	sidence	Address	(Numbe	er and St	reet, Cit	y, State,	Zip Cod	e)					
Name	of Assoc	iated Br	oker or [	Dealer										
			Listed H			ntends to	Solicit F	Purchase	ers				[ ] AII	States
(OHECK [AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	[]/***	o.u.co
Full Na	ıme (Las	st name	first, if in	dividual)										
Busine	ss or Re	sidence	Address	s (Numbe	er and S	treet, Cit	y, State,	Zip Cod	e)					
Name	of Assoc	ciated Br	oker or [	Dealer										
			Listed H			ntends to	Solicit I	ourchase	ers				[] A]]	States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	••	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

†f. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

overlange and amously exemplified.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ 0	\$ 0 \$ 553,350
Convertible Securities (including warrants)  Partnership Interests  Other (Specify: )  Total  Answer also in Appendix, Column 3, if filing under ULOE.		\$ 0 \$ 0 \$ 0 \$ 553,350
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors  Non-accredited Investors  Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.	10 None None	\$ 553,350 \$ 0 \$ 0
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	;	
Not Applicable		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505 Regulation A Rule 504 Total		\$ \$ \$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify:) Total		[]\$ 0 []\$ 0 [X]\$ 2,000 []\$ 0 []\$ 0 []\$ 0 []\$ 0 []\$ 0

<ul> <li>Enter the difference between the aggregate offering otal expenses furnished in response to Part C - Ques proceeds to the issuer."</li> </ul>	stion 4.a. This difference is the "adjusted g	tion 1 and ross	<u>\$575,185</u>
5. Indicate below the amount of the adjusted gross probe used for each of the purposes shown. If the amount an estimate and check the box to the left of the estimate adjusted gross proceeds to the issuer set for above.	at for any purpose is not known, furnish ate. The total of the payments listed must		
above.		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees Purchase of real estate Purchase, rental or leasing and installation of mach Construction or leasing of plant buildings and facilit Acquisition of other businesses (including the value that may be used in exchange for the assets or secu merger)	ninery and equipmenttiese of securities involved in this offering rities of another issuer pursuant to a	[ ]\$ [ ]\$ [ ]\$	[ ]\$ [ ]\$ [ ]\$ [ ]\$ [ ]\$
Repayment of indebtedness  Working capital  Other (specify): Capitalization of new bank (\$6,500 Affiliate (\$100,000), Stock Exchange (\$1,000,000) Column Totals  Total Payments Listed (column totals added)	0,000); capital contribution to	[ ]\$ [ ]\$ [ ]\$ [ ]\$	[X]\$575,185 [ ]\$ [ ]\$ [ ]\$ [X]\$575,185
·	EDERAL SIGNATURE	[/]	770,100
The issuer has duly caused this notice to be signed by 505, the following signature constitutes an undertaking upon written request of its staff, the information furnished Rule 502.	by the issuer to furnish to the U.S. Securit	ies and Excha	nge Commission
ssuer (Print or Type)  First American Bancorp	Signature	Date October 31,	2003
Name of Signer (Print or Type)	THE of Signer (Print or Type)		
John R. Davidson	Chairman and Chief Executive Officer		

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)